

Athletic Registration Form

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Circle One:	Bedford	Big Island	Montvale	Moneta	SC&G	Huddleston
Circle One:	Baseball	Softball	Football	Cheerleading	Soccer	Basketball
Player Last NamePlayer First Name						Male Female
DOB /	/	Parent/Gua	ardian Name			
Most Recent	School Attend	led			P	layer Current Grade Level
Mailing Addr	ess				City	State
Zip	_Home Phone	e	Worl	k Phone		Cell Phone
Email						
Emergency ContactPhone						
T-Shirt Size	Youth - S	M L XL A	dult - S M l	L XL		
Medical Cond	ditions/Allerg	ies				
Check here if	returning to	same age groi	up Prev	ious Team		
Fees (\$35) Cash □ Check □ (Make Checks Payable to Bedford County Parks & Recreation)						
			Volunteer	r Coaches Needed!	!	
Volunteer co Parks and Re			1 0	and work with tear	ns under the	e direction of Bedford County
		Yes	□ No □ As	sst. Coach 🗆 Head	Coach 🗆	
Coaching Exp	perience/Last	Year's Team				
		Tu	ırn over	to Read and	Sign	
For Office Use Only						
League Age:_ Association:_ Age Verified?		Re	ee Paid: eceipt #: aff Initial:		ate:	

Parent/Guardian Responsibility & Consent

- 1. Each participant, parent/guardian registering their child, as well all individuals present at any Bedford County Parks and Recreation sponsored activity must agree to and abide by the Parks and Recreation Code of Conduct.
- 2. A parent/guardian, who legally resides in the County of Bedford, may register his or her child to participate in a Bedford County Parks and Recreation Department athletic league. A youth player who registers to play in a Parks and Recreation league may play with or be registered to any other non-department sponsored team or league. However, a player's first obligation pertaining to practices and games must be to his or her recreation team. Any player who misses a recreation team practice or game may be subject to disciplinary measures approved by the Parks and Recreation Department and initiated by that team's head coach.
- 3. It is the responsibility of the parent/guardian to provide transportation to and from practices and games. Upon arrival, parents should make sure a coach is present. Player should be picked up directly after activities are completed.
- 4. It is the responsibility of the parent/guardian to return equipment furnished by the Parks and Recreation Department to the coaches no later than one(1) week following the team's last game. A player who fails to return all equipment will not be permitted to participate in any Bedford County Parks and Recreation athletic program until all equipment is returned.
- 5. I am aware of the activities, and I understand that Parks and Recreation Department employees, and all Recreation Association agents and volunteers are not responsible for determining whether my child is physically and/or mentally fit for this program.
- 6. I understand that any incorrect or false information provided on this form will result in the player being declared ineligible immediately and for the remainder of the season.
- 7. I understand the nature of the activity in which my child will be involved. I understand that this activity involves the potential for risk of injury. I understand that Bedford County and its employees/volunteers will not be financially responsible to any participant if he or she is harmed while taking part in the events listed above.
- 8. In consideration of Bedford County permitting my/my child's participation, I hereby declare that the terms of this RELEASE AND ASSUMPTION OF RISK have been fully read and understood by me, and I agree to assume the risks, including any injury to myself, that may arise by or in connection with this activity.
- 9. Bedford County Parks and Recreation welcomes the participation of all individuals, including those with disabilities or special needs. We are committed to compliance with the ADA and will provide reasonable accommodations to facilitate participation in our program. To ensure that reasonable accommodations are in place, program registration or accommodation requests should be received at least two weeks prior to the start date of the program. Bedford County Parks and Recreation recommends that parents or guardians consult their participant's pediatrician or health care professional to assess their participant's ability to participate in the athletic program. It is requested that parents or guardians provide in writing any additional instructions for the specific condition or need of their participant.

Date
above child's participation, furthermore I verify